

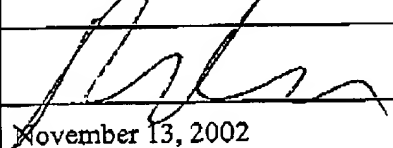
#5

PTO/SB/121 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CORRESPONDENCE ADDRESS INDICATION FORM		Address to: Assistant Commissioner for Patents Box CN Washington, DC 20231	
Please recognize the following address as the correspondence address:			
<input checked="" type="checkbox"/> Customer Number		24033 →	
OR		Type Customer Number here	
<input type="checkbox"/> Request for Customer Number (PTO/SB/125) submitted herewith			
in the following listed application(s) or patent(s):			
Patent Number (if appropriate)	Application Number	Patent Date (if appropriate)	U.S. Filing Date
	09/522,201		03/09/00
Typed or Printed Name	David W. Victor		(check one) <input type="checkbox"/> Applicant or Patentee <input type="checkbox"/> Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> Attorney or Agent of Record <u>Registration No. 39,867</u> (Reg. No.)
Signature			
Date	November 13, 2002		
Address of signer:	Konrad Raynes Victor & Mann LLP 315 S. Beverly Drive; Suite 210 Beverly Hills, CA 90212		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
<input type="checkbox"/> *Total of _____ forms are submitted			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CN, Washington, DC 20231.

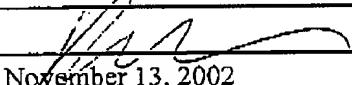
PTO/SB/21

TRANSMITTAL FORM	Application Number	09/522,201
<i>(To be used for all correspondence after initial filing)</i>	Filing Date	March 9, 2000
	Inventor	R. Dutta
	Group Art Unit	2776
	Examiner Name	Not Yet Assigned
Total Number of Pages in this Submission: 3	Attorney Docket Number	AUS990858US1


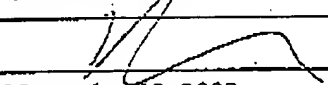
ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits /Declarations <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; ___ references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an application) <input type="checkbox"/> Drawing(s); ___ sheets <input type="checkbox"/> Licensing-related papers <input type="checkbox"/> Petition: <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, and/or Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ___	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information. <input checked="" type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>)
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name:	David W. Victor, Registration No. 39,867
Signature:	
Date:	November 13, 2002
KONRAD RAYNES VICTOR & MANN, LLP 315 South Beverly Drive, Suite 210 Beverly Hills, California 90212 (310) 556-7983	
<input checked="" type="checkbox"/> The Commissioner is authorized to charge any deficiency of fees, or credit any overpayment, Deposit Account No.09-0447	

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231, or being facsimile transmitted to the USPTO, on the date indicated below.		
Typed or Printed name:	David W. Victor	 24033 PATENT TRADEMARK OFFICE
Signature:		
Date:	November 13, 2002	

S.N. 09/522,201 Docket No. AUS990858US1 Date Mailed 11/13/02 By: DWV/ysi

Title: METHOD, SYSTEM, AND PROGRAM FOR DISPLAYING PAGES
DOWNLOADED FROM OVER A NETWORK IN AN APPLICATION WINDOW.

Client: International Business Machines Corporation

0072.0026

Receipt is hereby acknowledged for the following received in the Patent & Trademark Office
on the date stamped hereon:

- ☒ PTO/SB/21
- ☒ Correspondence Address Indication Form
- ☒ Request for Status
- ☒ Return Postcard